U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 47729	2. Fiscal Year Covered From:
	01/01/2004 Through: 12/31/2004
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name Stephen J Mikich	Name PLumbers & Steamfitters Local 342
	Labor Organization File Number 033-320
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 935 Detroit Ave	Street 935 Detroit ave
City ConCord	city Concord
State 0A ZIP Code + 4 945 18-25	7 State <i>CA</i> ZIP Code + 4 94-518-25
5. Position in labor organization.  BUSINESS AGENT	
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any;	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	$\infty$
State ZIP Code + 4	
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed Stephen O Bucker	On 8-2-05 925 686-5880
	Date Telephone Number

Name of Person Filing	File Number U-
B. Held an interest in or derived income or economic benefit with monetary substantial part of which consists of buying from, selling or leasing to, or oth of an employer whose employees your labor organization represents or is a (2) any part of which consists of buying from or selling or leasing directly or dealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business ctively seeking to represent, or
8. Name and address of Business (including trade name, if any).  Name Stephen T Mikich  Trade Name, if any: Plumbers + Steamf Her 342  P.O. Box, Bldg., Room No., if any  Street 935 Defroit Ave  City Concord  State CA ZIP Code + 4 945/8-29	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	None
	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	wone-
	12.b. Amount.
	- International State of the Control
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

## LM-30

"I have made a diligent search of employers, businesses and/or vendors with which the Union is involved. I have made as complete disclosure as I am advised by counsel that I am required to make, and I have made such required disclosures that, after a search of the records, I can now recall."

Stephen J. Mikich